OHITED STUTES SECURITIES AND EXCHANGE COMMISSION OMB Number: 3235-0076 Washington, D.C. 20549 Expires: May 31, 2005 imated average burden FORM D NOTICE OF SALE OF SECURITIESAN SEC USE ONLY PURSUANT TO REGULATION D. Serial SECTION 4(6), AND/OR INIFORM LIMITED OFFERING EXEMPTION DATE RECEIVED Name of Offering (check if this is an amendment and name has changed, and indicate change.) New York Game Factory, LLC Private Placement Filing Under (Check box(es) that apply): **Rule 504 Rule 505** Rule 506 Section 4(6) Type of Filing: 🛛 New Filing 🔲 Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) New York Game Factory, LLC Address of Executive Offices Telephone Number 782 Westminster Road, Brooklyn, NY 11230 (718) 421-6222 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business The Company is engaged in the invention, development, marketing, promotion, distribution and sale of games, including, without limitation, board games. 中国政策 的复数人名英国英格兰人姓氏曼德特的 Type of Business Organization limited partnership, already formed other (please specify): limited liability company corporation limited partnership, to be formed Month 0 Actual or Estimated Date of Incorporation or Organization: Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee. State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in loss of an available state exemption unless such exemption is predicated on the filing

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

must be completed.

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A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
• Each promoter of the issuer, if the issuer has been organized within the past five years;	
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equipments of the issuer; 	quity
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and	.d
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Member Full Name (Last name first, if individual) Jeffrey Gross	er
Business or Residence Address (Number and Street, City, State, Zip Code) 782 Westminster Road, Brooklyn, NY 11230	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Member Full Name (Last name first, if individual) Joel Rogers	er
Business or Residence Address (Number and Street, City, State, Zip Code) 711 West End Avenue, Apt. 3EN New York, NY 10025	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partne	er
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partne	er
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partne	er .
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partne	er
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partne	er
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	er
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)	
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of a federal notice.

B. INFORMATION ABOUT OFFERING	
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE	Yes No
2. What is the minimum investment that will be accepted from any individual?	ers)
Does the offering permit joint ownership of a single unit?	🛛 🔲
4. Enter the information requested for each person who has been or will be paid or given, directly or indirect remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the dealer only. N/A	on to be listed is an associated f the broker or dealer. If more
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individual States)	All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[MO] [PA]
Full Name (Last name first, if individual)	······································
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	· · · · · · · · · · · · · · · · · · ·
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individual States)	All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[MO] [PA]
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individual States)	All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	B] [MO] L] [PA]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXI	PENSES AND USE OF PROCE	EDS
1. Enter the aggregate offering price of securities included in this offering and the	total amount	
already sold. Enter "0" if answer is "none" or "zero." If the transaction is	an exchange	
offering, check this box and indicate in the columns below the amounts of	the securities	
offered for exchange and already exchanged.		
Type of Security	Aggregate	Amount
Type of Beening	Offering Price	Already Sold
Debt	\$_0	\$ 0
Equity	\$ 150,000.00*	\$ 102,000.00
☐ Common ☐ Preferre	ed (Convertible)	•
Convertible Securities (including warrants)*	\$ 0	\$ 0
Partnership Interests	\$ 0	\$ 0
Other (Specify:)	\$ 0	\$ 0
Total	\$ 150,000.00	\$ 102000,00
*The offering is for membership interests in the Company ("Members Agreement,	ship Interests"), as defined in the	Company's Operating
	Line and ATT OF	
Answer also in Appendix, Column 3, if fil	ling under ULOE.	
	4	
2. Enter the number of accredited and non-accredited investors who have purcha		
in this offering and the aggregate dollar amounts of their purchases. For of		
Rule 504, indicate the number of persons who have purchased securities and dollar amount of their purchases on the total lines. Enter "0" if answer is "none	ine aggregate	
donal amount of their purchases on the total lines. Enter of it answer is none	5 01 2 010.	A
	Number of	Aggregate Dollar Amount
	Investors	of Purchases
A dita d Turnada un		
Accredited Investors		\$ <u>0</u> \$ 0.
Non-accredited Investors	7	
Total (for filings under Rule 504 only)		\$ 102,000.00
Answer also in Appendix, Column 4, if fi	ling under ULOE	
3. If this filing is for an offering under Rule 504 or 505 , enter the information req		
securities sold by the issuer, to date, in offerings of the types indicated, in the		
months prior to the first sale of securities in this offering. Classify securities I in Part C - Question 1.	by type listed	
m ran C - Question 1.	T	
Type of Offering	Type of	Dollar Amount
D : 505	Security	Sold
Rule 505		\$ 0
Regulation A	<u></u>	\$_0
Rule 504	Membership Interests	\$ 102,000.00
Total	Interests	\$ 102,000.00 \$ 0
	······································	
4. a. Furnish a statement of all expenses in connection with the issuance and d		
the securities in this offering. Exclude amounts relating solely to organization		
the issuer. The information may be given as subject to further contingencies. of an expenditure is not known, furnish an estimate and check the box to the subject to further contingencies.		
estimate.	the tert of the	
	· · · · · · · · · · · · · · · · · · ·	
Transfer Agent's Fees	<u> </u>	\$ 0
Printing and Engraving Costs	<u></u> <u>\</u>	\$ 300.00
Legal Fees	<u></u>	\$ 7,500.00
Accounting Fees	<u> </u>	\$ 0
Engineering Fees	<u></u>	\$ _0
Sales Commissions (specify finders' fees separately)	L	\$_0
Other Expenses (identify) Bank fees, consulting fees, meals, travel,	\boxtimes	
postage, escrow account, administration fees, state filing fees		\$ 700.00

b. Enter the difference between the aggregate offering price given in response to Pa		EDS
Question 1 and total expenses furnished in response to Part C - Question 4 a. This difference is the "adjusted gross proceeds to the issuer"		\$ 141,500.00
Indicate below the amount of the adjusted gross proceeds to the issuer used or propose used for each of the purposes shown. If the amount for any purpose is not furnish an estimate and check the box to the left of the estimate. The total of the pristed must equal the adjusted gross proceeds to the issuer set forth in responses to Questions 4 b above.	known, ayments	
	Payments to Officers, Directors & Affiliates	Payments to Others
Salaries and fees	\$_0	□ \$ <u>0</u>
Purchase of real estate	□ \$ 0 ·	□ \$ <u>0</u>
Purchase, rental or leasing and installation of machinery and equipment	\$ 0	□ \$ <u>0</u>
Construction or leasing of plant buildings and facilities	□ \$ <u>0</u>	□ \$ <u>0</u>
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□ \$ 0	□ \$ 0
Repayment of indebtedness	□ \$ O	⊠ \$ 5,500.00
Working capital	S 0	⊠ \$ 136,000.00
Other (specify):	·	□ \$ <u>0</u>
Column Totals	□ \$ O	□ \$ 0
Total Payments Listed (column totals added)		1,500.00
D. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signed by the undersigned duly authorize ollowing signature constitutes an undertaking by the issuer to furnish to the U.S. Securif its staff, the information furnished by the issuer to any non-accredited investor pursuant	ities and Exchange Commis	ssion, upon written request
Signature New York Game Factory, LLC	Date // 21/0	4
Name of Signer (Print or Type) Pitle of Signer (Print or Type) Managing Member		
ATTENTION		

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Is any party described in 17 CF of such rule?	FR 230.262 pre	esently subject to any of the disqualifica	-	Yes ×	No 区
	* 4	See Appendix, Column 5, for state	response.		
2. The undersigned issuer hereby CFR 239.500) at such times a			ny state in which this notice is filed, a notice of	on Form	D (17
	of the state in	which this notice is filed and understan	must be satisfied to be entitled to the Uniform is that the issuer claiming the availability of t		
The issuer has read this notificati	on and knows		sed this notice to be signed on its behalf by th	a unders	ianed
	on and knows		sed this notice to be signed on its behalf by th	e unders	igned
The issuer has read this notification duly authorized person.	on and knows		sed this notice to be signed on its behalf by th	e unders	igned
duly authorized person.	on and knows		sed this notice to be signed on its behalf by th	e unders	igned
duly authorized person. Ssuer (Print or Type)	No.	the contents to be true and has duly cau		e unders	igned
	No.	the contents to be true and has duly cau		e unders	igned

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

<u> </u>				APP	ENDIX		· · · · · · · · · · · · · · · · · · ·		
1	Intend to non-a investor	Type of security and aggregate offering price offered in state t B-Item 1) Type of security and aggregate offering price amount purchased in State (Part C-Item 1) Number of Number of					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
				Accredited		Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
CO									
CT						·			
DE									
DC					·				
FL						1			
GA		,							
н		,							
ID									
IL	х		Membership Interests: \$150,000						X
IN									
IA							·		
KS									
KY									
LA		<u> </u>				2			
ME					·				
MD				-					
MA	Х		Membership Interests: \$150,000						Х
MI									
MN						,			
MS									
мо			• -						
			<u> </u>	<u></u>	<u> </u>	1		L	

				APPE	NDIX					
1	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
MT								, .		
NE							,			
NV										
NH										
NJ	X		Membership Interests; \$150,000						х	
NM										
NY	Х		Membership Interests, \$150,000	-					Х	
NC			·							
ND										
ОН										
OK		-								
OR		–								
PA				*				·		
RI									1	
SC										
SD										
TN										
TX	'									
UT			:			T				
VT										
VA							<u> </u>			
WA	X		Membership	<u> </u>					X	
wv			Interests: \$150,000			:				
WI										
WY										
PR		•								